

TITLE 470
REFUGEE RESETTLEMENT PROGRAM (RRP) AND
THE REFUGEE MEDICAL ASSISTANCE PROGRAM (RMAP)

CHAPTER 1-000 GENERAL BACKGROUND

1-001 Legal Basis: The Refugee Act of 1980 (Public Law 96-212), Refugee Assistance Amendments of 1982 (Public Law 97-363), and the Federal Deficit Reduction Act of 2005 (Public Law 109-171) authorize financial and medical assistance to refugees in the United States. The program is funded completely by federal money.

1-002 Purpose: The purpose of the Refugee Resettlement Program (RRP) is to provide assistance to refugees who are not eligible for a categorical program to achieve economic self-sufficiency as quickly as possible and to assist with refugees' financial and medical assistance during their initial resettlement in the United States.

1-003 Administration: RRP is administered by the Nebraska Department of Health and Human Services in accordance with state laws and with rules, regulations, and procedures established by the Director of the Nebraska Department of Health and Human Services.

1-004 Definition of Terms: For use within RRP, the following definitions of terms will apply unless the context in which the term is used denotes otherwise.

A-Number: Alien registration number. An alien registration number is assigned to an alien when s/he enters the United States. The number is shown on the refugee's Form I-94.

Adequate Notice: Notice of case action which includes a statement of what action(s) the worker intends to take, the reason(s) for the intended action(s), and the specific manual reference(s) that supports or the change in federal or state law that requires the action(s), (see also 470 NAC 1-009.04 ff.).

Applicant: An individual who applies for assistance.

Application: The action by which the individual indicates in writing the desire to receive assistance.

Application Date: For new and reopened cases, the date a properly signed application for assistance is received.

Approval/Rejection Date: The date that the new or reopened case is determined eligible or rejected by the local office.

Budgetary Need: The amount the client is eligible for before adjustments for over and underpayments and \$10 minimum payment.

Categorical Assistance: Assistance administered by the Nebraska Department of Health and Human Services. For the purposes of this definition it includes Temporary Assistance for Needy Families with Children (TANF)/Aid to Dependent Children/Medical Assistance (ADC/MA); Child Welfare Payment and Medical Services Program; Assistance to the Aged, Blind, and Disabled (AABD)/MA; State Disability Program (SDP/MA); RRP/MA; Kids Connection; and Children's Medical Assistance Program (CMAP).

Client: An individual receiving or applying for RRP/MA. This term is used when the same policies apply to an applicant and a recipient.

Contributions: Verified payments which are paid to or for an RRP/MA unit (see 470 NAC 2-008.04A).

Department: The Nebraska Department of Health and Human Services.

Equity: The fair market value of property minus the total amount owed on it.

Fair Market Value: The price an item of a particular make, model, size, material, or condition will sell for on the open market in the geographic area involved.

Grant Case: A case receiving an RRP payment or eligible to receive payment but not receiving it because of the minimum payment.

Household: Individuals living together. There may be more than one public assistance unit within a household.

Initial Resettlement: A period of time immediately after the refugee's arrival in the U.S.

Initial Voluntary Resettlement Agency: The sponsoring agency for the reception and placement of refugees.

Inquiry: Any question received by phone, letter, or personal contact without any indication that the individual wishes to apply. This may or may not be followed by a request or application for assistance.

Match Grant: An agreement with a voluntary resettlement agency that enables the agency to issue the assistance grant for the first four months of a refugee's eligibility.

Minimum Payment: The smallest amount for which a grant is issued. No grant is issued for \$9.99 or less (for exceptions see 470 NAC 3-004).

Needy Individual: One whose income and other resources for maintenance are found under assistance standards to be insufficient for meeting the basic requirements, and to be within the resource limits allowed an individual (see also 470 NAC 2-007.01 and 2-008.01).

Payment Effective Date: The month, day, and year that the grant payment is to be effective.

Pending Case: A case in which the application has been taken and eligibility is yet undetermined. All pending cases must be entered into the N-FOCUS system within two working days.

Prospective Eligibility for Medical Assistance (MA): The date of eligibility beginning on the first day of the month of the date of request if the client was eligible for MA in that same month.

Prudent Person Principle: The practice of assessing all circumstances regarding case eligibility and using good judgment in requiring further verification or information before determining initial or continuing eligibility (see also 470 NAC 1-008).

Rejected Case: A case in which an application was completed and signed, but the applicant did not meet the categorical, procedural, or financial requirements of the program.

Request Date: The date the client requests assistance. For reopened cases, this is the date of the new request. For program changes, this is the request date for the new program.

Retroactive Eligibility for MA: The date of eligibility beginning no earlier than the first day of the third month before the month of request or the date of entry into the U.S.

Retroactive Payment: Any payment made during the current month but for a prior month.

RRP/MA: A categorical program consisting of financial and medical assistance or medical assistance only.

Standard of Need: The maximum payment according to eligible unit size.

Supplemental Payment: Any payment made for and during the current month after N-FOCUS cutoff.

Timely Notice: A notice of case action dated and mailed at least ten calendar days before the date the action becomes effective (see also 470 NAC 1-009.04 ff.).

Unit: Eligible individuals considered in determining the grant and/or medical assistance.

Withdrawal: A voluntary written retraction of an application.

Zero Grant: A case which is not eligible for a grant payment but which continues to receive medical assistance.

{Effective 2/10/2002}

1-005 Worker Responsibilities: The worker has the following responsibilities.

1-005.01 Duties at Initial Application or Redetermination: At the time of initial application and redetermination, the worker must:

1. Allow any refugee who requests assistance to complete an application;
2. Give an explanation of the program requirements including compliance with employment requirements;
3. Collect and review the information entered on the application form;
4. Explain the eligibility and payment factors and how changes will affect eligibility and payment;
5. Explain the eligibility and payment factors that require verification;
6. Obtain the client's written consent for the needed verifications;
7. Explore income that may be currently or potentially available such as Retirement Survivors, and Disabled Insurance (RSDI); Supplemental Security Income (SSI); resettlement money, etc.;
8. Give information about the social and other financial services available through the agency, such as social services; HEALTH CHECK; family planning; and RMAP;
9. Inform the client about his/her rights and responsibilities (see 470 NAC 1-006 and 1-007);
10. Inform the client that s/he must show his/her medical card to all providers and must inform the worker of any health insurance plan, any individual(s), or any group that may be liable for the client's medical expenses;
11. Complete necessary reports and information forms;
12. Notify the initial resettlement agency (or local affiliate) that the refugee has applied for assistance. If the agency has no local affiliate in Nebraska, the regional or national office of that agency must be notified;
13. Act with reasonable promptness on the client's application for assistance;
14. Provide adequate notice to the client of:
 - a. Approval for a grant and the amount;
 - b. Approval for medical assistance;

- c. Rejection of the application and the reason; or
- d. Confirmation of the client's voluntary withdrawal;
- 15. Explain the minimum payment (see 470 NAC 3-004); and
- 16. Explain the appeal process (see 465 NAC 2-001.02).

{Effective 2/10/2002}

1-005.02 Continuing Responsibilities: The worker has the continuing responsibility to:

- 1. Provide adequate notice of any action affecting the client's assistance case (see 470 NAC 1-009.04C to determine if timely notice is necessary);
- 2. Treat the client's information confidentially;
- 3. Uphold the client's civil rights; and
- 4. Inform the client when his/her case is closed that s/he has the right to reapply if it is within the time limit. If it is past the time limit, the client has the right to apply for another category of assistance.

1-005.03 Privacy Act: In accordance with the Privacy Act, records containing personal information on persons who are refugees may be made available to:

- 1. The Departments of State, Labor, Justice, Defense, and Health and Human Services;
- 2. The state and local governments for social services activities;
- 3. The state employment services to assist in obtaining employment for refugees;
- 4. The Volunteer Resettlement Agencies (Volags);
- 5. The state and local governments acting in the capacity of a Volag; and
- 6. Funded offices of refugee resettlement projects providing employment and social services.

1-006 Client Responsibilities: The client is required to:

- 1. Provide complete and accurate information. State and federal law provides penalties of a fine, imprisonment, or both for persons found guilty of obtaining assistance or services for which they are not eligible by making false statements or failing to report promptly any changes in their circumstances;
- 2. Report a change in circumstances no later than ten days following the change. This includes information regarding:
 - a. Monthly expenses;
 - b. Resources or other financial matters;
 - c. Employment status including the commencement or termination of employment;
 - d. Enrollment in higher education;
 - e. Enrollment in a training program;
 - f. Composition of the household;
 - g. The living arrangements;

- h. Address;
- i. Incapacity or disability status; or
- j. A temporary absence from the home of any unit member; and
- k. Changes in the amount of monthly income, including:
 - (1) All changes in unearned income; and
 - (2) Changes in the source of employment, in the wage rate and in employment status, i.e., part-time to full-time or full-time to part-time.
- 3. Present his/her medical card to providers;
- 4. Inform the medical provider and worker of any health insurance plan, any individual, or any group that may be liable for his/her medical expenses;
- 5. Cooperate in obtaining any third party medical payments;
- 6. Enroll in a health plan and maintain enrollment if:
 - a. One is available to the client;
 - b. The client is able to enroll on his/her own behalf; and
 - c. The Department has determined that enrollment in the plan is cost effective;
- 7. Pay any unauthorized medical expenses; and
- 8. Pay any required medical copayment (see 470 NAC 4-010 ff.).
{Effective 2/10/2002}

1-007 Client Rights: The client has the right to:

- 1. Apply. A refugee who wishes to request and/or apply for assistance must be given the opportunity to do so. No refugee may be denied the right to apply for RRP/MA;
- 2. Reasonably prompt action on his/her application for assistance (see 470 NAC 1-009.03D);
- 3. Adequate notice of any action affecting his/her application or assistance case (see 470 NAC 1-009.04C to determine if timely notice is necessary);
- 4. Appeal to the Director for a hearing on any action or inaction with regard to an application, the amount of the assistance payment, or failure to act with reasonable promptness. The appeal must be filed in writing within 90 days of the action or inaction;
- 5. Have his/her information treated confidentially;
- 6. Have his/her civil rights upheld. No person may be subjected to discrimination on the grounds of his/her race, color, national origin, sex, age, disability, religion, or political belief;
- 7. Have the program requirements and benefits fully explained;
- 8. Be assisted in the application process by the person of his/her choice;
- 9. Receive medical assistance without a separate application if s/he is eligible for categorical assistance; and
- 10. Referral to other agencies.

1-008 Prudent Person Principle: When the statements of the client are incomplete, unclear, or inconsistent, or when other circumstances in the particular case indicate to a prudent person that further inquiry must be made, the worker must obtain additional verification before eligibility is determined. The client has primary responsibility for providing verification of information relating to eligibility. Verification may be supplied in person, through the mail, or from another source (as an employer or a resettlement agency). If it would be extremely difficult or impossible for the client to furnish verification in a timely manner, the worker must offer assistance.

1-009 Application Processing

1-009.01 Procedures for Processing Refugee Applications: The worker first determines eligibility for ADC/MA, AABD/MA, or SDP/MA. If the individual is not eligible for any of the other categorical programs, the worker determines eligibility for RRP/MA.

If a refugee desires, s/he may receive MA only even if s/he is eligible to receive cash payments also.

1-009.02 Request: A request for assistance may be made in an interview, by letter, or by telephone, and may be made by the applicant, his/her guardian or conservator, an individual acting under a duly executed power of attorney (see 470 NAC 1-004), an individual from the resettlement agency, an RRP case manager, or another person authorized to act for the applicant. The worker must record the request date on the application. If an interview cannot be scheduled within a reasonable period of time, the application must be mailed promptly. The applicant must provide to the Department the information requested on the application which is in the Public Assistance Forms Manual and incorporated into these rules.

A request is terminated:

1. When a properly signed application is received;
2. When the applicant or his/her representative notifies the worker of withdrawal;
3. After 30 days if the worker has heard nothing further from the applicant or his/her representative. However, the worker may continue to hold a request pending if there is reason to believe the applicant intends to complete his/her application.

1-009.03 Application: A request becomes an application when a properly signed application is received. When adding a program to an application the date of request is also the application date. A properly signed application contains:

1. Name;
2. Address; and
3. Proper signature, as defined by the appropriate program.

An application may be signed by an individual for himself/herself or by the applicant's guardian, conservator, or an individual acting under a duly executed power of attorney. If the application is for medical benefits only, the client's relative or another individual acting on the client's behalf may sign the application.

An application for medical benefits only may be taken on behalf of a deceased person. If there is no one to represent the deceased person, a representative of the resettlement agency or the administrator of the estate may sign the application. The eligibility requirements must have been met at the time medical services were rendered.

{Effective 2/10/2002}

1-009.03A Notification of Initial Resettlement Agency: When a refugee applies for RRP, the worker notifies the initial resettlement agency (or its local affiliate).

1-009.03B Alterations: The application, when completed and signed by the client or his/her representative, constitutes his/her own statement in regard to his/her eligibility. If the worker adds information received from a client to a properly signed application, the worker must date the information and:

1. Request that the client initial the change, if the client is present; or
2. Identify the source of the information, if the client is not present.

If a substantial amount of information is added during the face-to-face interview, the worker may request that the client sign and date the application again. The worker may alter an initial application up to the date of approval. An application for a redetermination may be altered up to the date the redetermination has been completed.

1-009.03C Signing a Blank Application: The client must not be asked to sign a blank application. In signing an assistance application, the client states that the information is correct to the best of his/her knowledge and belief.

1-009.03D Prompt Action on Applications: The worker must act with reasonable promptness on all applications for assistance. The worker must make a determination of eligibility on an application within 45 days from the date of the request. If circumstances beyond the control of the worker prevent action within 45 days, the worker must record the reason for the delay in the case record. The worker must send a Notice of Action informing the applicant of the reason for the delay. The 45-day time period must not be used as a routine waiting period before approving assistance.

1-009.03D1 Application for a Refugee Who Needs Emergency Services: If a refugee needs emergency services, the worker must determine eligibility within seven days from receipt of the application. A refugee is deemed to need emergency services if the refugee's financial situation is threatening his/her health or well being.

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1-009.03E Place of Application: The local office in the county where the individual resides is responsible for taking the application. Applications may be taken in the local office, in the applicant's home, or another place that is convenient for the applicant.

Any individual may apply for medical assistance with a designated provider who has contracted with the Department to process Medicaid applications at their location.

1-009.03F Withdrawals: The applicant may voluntarily withdraw an application. If the applicant verbally withdraws the application, the worker must request a written statement of withdrawal. The worker must make note of the withdrawal in the case record and give written confirmation of withdrawal to the applicant on the Notice of Action.

If the applicant does not provide written confirmation of the withdrawal within 30 days from the application date, the worker must reject the application. The worker send the Notice of Action to the applicant notifying him/her of the rejection.

1-009.03G Authorization for Financial Investigation: For some sources the worker asks the client to sign a release of information when it appears that information given is incorrect, when the client is unable to furnish the necessary information, or for sample quality control verification. A copy of the authorization for release of information from the application may be used if the source will accept it.

1-009.03H Intake History: The worker must include the following information in the case record:

1. The refugee's alien identification number and name, refugee's country of origin, pertinent facts about the refugee family, former work history, place of residence, skills, education, and indication of whether the refugee speaks English;
2. The name of the voluntary resettlement agency, and the name of the sponsor or another individual who is assisting the refugee;
3. Possibility of employment, health condition, needs, and any other facts which may assist in determining the ability of the individual to provide self-support;
4. Date of entry to the United States; and
5. A photocopy of Form I-94 or Form I-151.

1-009.04 Notice of Action: The worker must send adequate notice on a Notice of Action to notify the client of any action affecting his/her assistance case. The Notice of Action must be sent to the last-reported address. If the form is inadvertently sent to the wrong address, the worker must send a new form, allowing the client ten days from the date the corrected form is sent (if adequate and timely notice is required).

1-009.04A Types of Notices

1-009.04A1 Adequate Notice: An adequate notice must include a statement of what action(s) the worker intends to take, the reason(s) for the intended action(s), and the specific manual reference(s) that supports or the change in federal or state law that requires the action(s). The worker must send an adequate notice no later than the effective date of the action.

1-009.04A2 Timely Notice: A timely notice must be dated and mailed at least ten calendar days before the date that action would become effective, which is always the first day of the month.

1-009.04B Adequate and Timely Notice: In cases of intended adverse action (action to discontinue, terminate, or reduce assistance or to change the manner or form of payment or service to a more restrictive method, i.e., protective payee, medical lock-in), the worker must give the client adequate and timely notice.

1-009.04C Situations Requiring Adequate Notice Only: In the situations outlined below, the worker may dispense with timely notice but must send adequate notice no later than the effective date of action:

1. The agency has factual information confirming the death of a client;
2. The agency receives a written and signed statement from the client:
 - a. Stating that assistance is no longer required; or
 - b. Giving information which requires termination or reduction of assistance, and indicating, in writing, that the client understands the consequence of supplying such information;
3. The client has been admitted or committed to an institution, and no longer qualifies for assistance;
4. The client has been placed in skilled nursing care, intermediate care, or long-term hospitalization;
5. The client's whereabouts are unknown and agency mail directed to the client has been returned by the post office indicating no known forwarding address. The agency must make the client's check available to the client if his/her whereabouts become known during the payment period covered by a returned check;
6. The client has been accepted for assistance in another state and that fact has been established; or
7. The time limit for eligibility has expired.

1-009.04D Waiver of Notice: If a client agrees to waive his/her right to a timely notice in situations requiring timely notice, the worker must obtain a statement signed by the client to be filed in the case record.

1-009.04E In Fraud Cases: At least five days' advance written notice must be given if:

1. The agency has facts indicating that action should be taken to discontinue, terminate, or reduce assistance because of probable fraud by the client; and
2. The facts have been verified where possible through collateral sources.

1-009.04F Continuation of Benefits: The worker must not carry out an adverse action pending an appeal hearing if:

1. The case action being appealed required adequate and timely notice (see 470 NAC 1-009.04B and 1-009.04C);
2. The client requests an appeal hearing within ten days following the date the Notice of Action is mailed; and
3. The client does not refuse continued assistance.

Benefits are not restored pending a hearing when adequate notice only is required (see 470 NAC 1-009.04C).

This regulation in no way restricts the worker from continuing normal case activities and implementing changes to the assistance case that are not directly related to the appeal issue.

If the worker's action is sustained by the hearing decision, the worker must institute recovery procedures against the client to recoup the disputed amount of assistance furnished the client during the appeal period (see 470 NAC 3-006.05B1).

1-009.04G Reduction of Benefits: Subject to the availability of federal funds, some or all existing services may be terminated with ten days' notice to recipients. If services are terminated, the program will suspend accepting future applications.

1-009.05 Local Office Responsible for Case Handling: The local office that serves the county where a client resides is responsible for handling the case.

1-009.05A Transfer to New County of Residence: The receiving office does not need to do a complete redetermination when a case is transferred.

1-009.05B Case Handling of Temporary Absences: The case of an individual in an institution or a care facility for a temporary stay remains with the original local office in the county where the client resides and intends to return. Similarly, if a client is out of his/her county of residence for a brief visit the case is not forwarded. It remains the responsibility of the local office in the county where the client intends to return.

1-010 Forms: Instructions for the forms used in the Refugee Resettlement Program are contained in the Public Assistance Forms Manual.